

**APPLICATION FOR ZONING VARIANCE**  
**City of Canton, Texas**

**INSTRUCTION: Please fill out completely.**  
**If more space is needed, use extra sheet. Include**  
**a plat of the property.**

Date: \_\_\_\_\_

1. APPLICANT: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_
2. AGENT OR ATTORNEY: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_
3. Zoning Variance Request:  
Front: From: \_\_\_\_\_ To: \_\_\_\_\_  
Back: From: \_\_\_\_\_ To: \_\_\_\_\_  
Side: From: \_\_\_\_\_ To: \_\_\_\_\_  
Other: \_\_\_\_\_
4. PROPERTY DESCRIPTION: (Physical address, Lot, Block, Name of Subdivision or Addition)  
\_\_\_\_\_  
(If description is by metes and bounds, please attach on separate sheet)
5. PRESENT USE OF LAND (If vacant land, so state) \_\_\_\_\_  
\_\_\_\_\_
6. PROPOSED DEVELOPMENT & REASONS FOR VARIANCE REQUEST: \_\_\_\_\_  
\_\_\_\_\_
7. STATUS OF APPLICANT: (If other than owner, attach written authority from owner)  
(a) Owner \_\_\_\_\_  
(b) Trustee \_\_\_\_\_ (List name of individuals for whom property is held in trust)  
\_\_\_\_\_  
(c) Corporation \_\_\_\_\_ (List name & title of officers & names of board of directors)  
\_\_\_\_\_  
  
(d) If application is made by someone other than the above, please indicate relationship between applicant and owner, if any, or the capacity in which the applicant is submitting the application (e.g. prospective purchaser, tenant, relative, etc.)
8. FILING FEE: \$100.00 (Make check payable to the City of Canton)
9. Mail or bring application to the City Hall, City of Canton, 290 E. Tyler, P.O. Box 245, Canton, Texas 75103. **Please include a plat of the property.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

Revised 02/05